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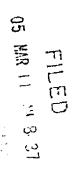
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Off Resign



COVER LETTER

TO: Amendment Section

Division of Co	rporations		
NAME OF CORP	ORATION: Taylur	- Hodkin Kup	elouit \$0
DOCUMENT NUI	MBER: <u>P950</u>	2000 90495	1
The enclosed Articl	les of Amendment and fee a	re submitted for filing.	
Please return all con	rrespondence concerning thi	s matter to the following:	
	TEFFREY OS	trally Esq.	
	/ / / C	m/ Company)	
35	TO E. Lus C	las Blud S (Address)	He 1440
Fa	ort Laude.	(Address) dale F2 3 ate/ and Zip Code)	3301
For further informa	tion concerning this matter,	please call:	
Jeffrey	Ostraw of Contact Person)	at (<u>954</u>) <u>52</u> (Area Code & Daytim	5-4 10 () e Telephone Number)
•	for the following amount:		
11 \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
<u>Mai</u>	ling Address	Street Address	

Street Address

Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION

1. FREQUENT TO YOR hereby resign as an office & Director (Title)

of Taylor Hock Kin Kopelanik & OS how, PA

(Name of Corporation)

(Document Number, if known)

(Signature of resigning officer/director)

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314